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Since the advent of HIV/AIDS in the early 1980s, there has been a multitude of attempts to explain its mysterious origins from both the scientific community and the general public. In *AIDS and Accusation: Haiti and the Geography of Blame*, Paul Farmer explores the key accusation narratives surrounding AIDS. Beginning with the scientific community, Farmer states:

In December 1982, for example, a physician with the U.S. National Cancer Institute was widely quoted as announcing that ‘we suspect that this may be an epidemic Haitian virus that was brought back to the homosexual population in the United States.’ This theory, although unbolstered by research, was echoed by other physicians and scientists investigating (or merely commenting on) AIDS (Farmer 2006, 3).

Shortly thereafter, on March 4, 1983, the Centers for Disease Control officially identified four “high-risk groups” for the contraction and spread of AIDS, including homosexuals, Haitians, hemophiliacs, and heroin users (Farmer 2006, 211). Members of the groups were termed the “Four-H Club” by the popular media, and the stigma and discrimination towards those categorized as “high-risk” was significantly exacerbated. AIDS-related accusations prevailed throughout the West and had devastating effects on Haitians in both the United States and Haiti. Some effects included bullying and violence against Haitian children in U.S. schools, the eviction of thousands of Haitian-Americans from their homes, the deterioration of Haiti’s tourist industry, and unexplained job losses among Haitians living in the U.S., which compromised the well-being of rural Haitians whose remittances from migrant family members was shut off.

In addition to accusations circulating in the scientific community, Farmer identifies two accusation narratives mounted by the accused. The second form of AIDS-related accusation was found within the rural Haitian community in relation to *maji*, or magic. In this counter-blame theory, *sida* or AIDS was described as the “jealousy sickness,” “a sickness emblematic of a nation of poor people distracted from the ‘real struggle’ by the hurts they inflict on one another” (Farmer 2006, 109). Dieudonne, one of Farmer’s key informants and the third villager to fall victim to AIDS in Do Kay, was the first to explain AIDS in this manner to Farmer. According to Dieudonne, *sida* is sent out of jealousy or spite through means of sorcery, often by one poor person to another when someone becomes socially or economically successful at the expense of others or without redistributing their accumulated wealth to the desperately poor (Farmer 2006, 106). The third counter-blame theory discussed was labeled as a “conspiracy theory,” as much of the Haitian population, and many Africans, argued that HIV/AIDS was created and released by the U.S. or “white folks” as a weapon of warfare to stem the growing Haitian and black populations (Farmer 2006, 234).

At a time when the epidemic was plagued with mystery and bigoted assumptions, Farmer brilliantly examines and explains the development of these three AIDS-related accusations from a multi-disciplinary approach, including ethnographic, historic, epidemiologic, and political-economic analyses. Through his extensive analysis developed from vast research and years of ethnographic fieldwork in the remote village of Do Kay from 1983, Farmer invalidates the primary accusation theory which described AIDS as a Haitian virus brought to the U.S. homosexual population, arguing against the notion that positioned “isolated Haiti” as the source of the pandemic. He offers a more

valid and evidence-based explanation that shows how economic-political relations in favor of the U.S. have led to widespread poverty and unemployment in Haiti, thereby facilitating an industry of sexual tourism. The sexual tourism industry and gay subculture was driven and shaped by the perception of Haiti as a homosexual's fantasy in which tourists could engage in exotic transactional sex with local Haitian men, eventually leading to the first cases of AIDS in Haiti and the reliance on institutionalized prostitution (Farmer 2006, 146–7). Farmer also describes HIV/AIDS in the historical, political, and economic Haitian context, explaining how historical events, international relations and preexisting misconceptions, such as the Trans-Atlantic Slave Trade, European and American imperialism, independence movements, the “West Atlantic system,” North American folk models, and much more, have deeply shaped the varying illness narratives and experiences of those affected.

Throughout the ethnography, Farmer generates, extends and expands ongoing conversations in medical anthropology. As previously stated, Farmer consistently cites the importance of examining the social, historical, and political context when attempting to understand and treat infectious disease in impoverished nations; in fact, it is a central tenet in *AIDS and Accusation*. In 2010, Margaret Lock and Vinh-Kim Nguyen continued this conversation in their textbook, *An Anthropology of Biomedicine*. In chapter four, “Local Biologies and Human Difference,” Lock and Nguyen describe the inadequacy and blaming nature of using cultural beliefs and practices to explain persistent poor health and the spread of infectious diseases. According to the authors:

Efforts to portray the way in which people seek to survive and reproduce human and social existence historically and in the present are often glossed as products of ‘culture.’ From there, it has been a short step to see culture as a monolithic force that determines peoples’ identity and

behavior... [and] doctors and public health professionals have often used the culture concept as the key in linking social factors and disease (Lock and Nguyen 2010, 103).

This statement can be seen in direct connection to the material first presented by Farmer in 1992, and the authors even use his experiences to validate their theory. In the ethnography, *AIDS and Accusation: Haiti and the Geography of Blame*, Farmer brings to light the North American folk model, presented by medical and social scientists and the popular media, which describes Haitians as mysterious, isolated, disease-ridden, blood-maddened and engaging in exotic, violent voodoo rituals (Farmer 2006, 3). Farmer asserts that this folk model of Haitians was developed long before the advent of AIDS due to an extensive history of racism and ethnocentrism, but was used to justify the “scientific” blaming and risk-grouping of Haitians both in the U.S. and in Haiti.

One can also draw comparisons to Seth Holmes’ ethnography, *Fresh Fruit, Broken Bodies: Migrant Farmworkers in the United States*, but for different reasons. In the introduction of *AIDS and Accusation*, Farmer states that it is the anthropologist’s job to bring to light the unseen connections between large-scale forces in small-scale settings, such as in the village of Do Kay (Farmer 2006, 9). In several chapters of the ethnography, Farmer describes how the abrupt building of a hydroelectric dam in Haiti’s central region in 1956, facilitated by officials in Haiti and Washington, D.C., led to the destruction of a once-fertile valley and the displacement of hundreds of villagers who were forced to migrate into the barren hills on either side of the reservoir; this is how the village of Do Kay was formed. According to Farmer, both villages on either side of the dam became exceedingly poor and unable to provide for themselves and their families, and most blamed their economic standing on the dam which brought them neither

electricity nor water as promised (Farmer 2006, 7). Farmer attributes the three cases of AIDS that were present in Do Kay during his fieldwork to this large-scale force, as many resulted in migrating to the city, Port-au-Prince at one point in their lives for economic opportunities, most likely contracting the disease there.

One can identify similarities when analyzing Seth Holmes' (2013) description of the reasons for immigrating to the United States among the Triqui people of southern Mexico. Holmes discusses the large-scale political force, NAFTA (North Atlantic Free Trade Agreement) in relation to the Triqui community, essentially arguing that banning trade tariffs and opening competition in the market with America's cheap, highly subsidized resources led to vicious cycles of poverty, the displacement of communities, and the need to emigrate for survival. The pain and suffering experienced by the majority of Triqui workers can be attributed to NAFTA, a highly economic and political agreement made by those in power. Although the Mexican citizens had no say in the decision, they were the ones who felt the momentous and destructive effects most (Holmes 2013, 25–41).

Through analyzing Farmer's ethnography, one can also understand how his studies in medical anthropology and its concepts have affected the way he approaches the field. For example, Farmer places significant emphasis on the existence and effects of multiple forms of violence among the people most marginalized. In *AIDS and Accusation*, Farmer discusses the political violence that occurred in Haiti during his stay, including the state-sponsored massacre of thousands of unarmed protestors on Election Day, the dumping of dead bodies and the shootings of innocent bystanders in attempts to continue the fear that gave power to the militaristic dictatorship. One can also view the

risk-grouping of Haitians as a means of everyday violence, as the stigma that developed out of it caused a significant amount physical, emotional, and economic suffering for both Haitians living in the United States and in Haiti.

In addition, Farmer has also shown himself to be very sensitive to the alternative ways in which the villagers of Do Kay experienced and perceived illness and healing, as they often engaged in some form of medical pluralism when biomedicine was available. For example, one of his informants, Dieudonne consulted both a biomedical doctor and a Houngan voodoo priest when his AIDS-related sickness remained persistent. Farmer recognized that Dieudonne understood the epidemic to be a “jealousy sickness,” and the result of sorcery, therefore, in order to regain his health, he would have to combat these external forces with the help of an expert in *maji*. Farmer describes several reasons for Voodoo practices to continue in full force in Haiti, but it essentially boils down to the fact that the nation is plagued with extreme widespread poverty, and due to the desperation to break out of it, the attempt to understand it, and the need to find a sense of comfort among turmoil, the majority of rural Haitians turn to sorcery to combat the unequal distribution of wealth (Farmer 2006, 204).

When attempting to critique *AIDS and Accusation: Haiti and the Geography of Blame*, I feel the need to first applaud Paul Farmer for tackling such an enormous, yet increasingly important topic, and one that had previously garnered little attention in the medical and social science communities. I believe Farmer did a brilliant job in analyzing the situation from a multi-disciplinary approach, incorporating a significant amount of historic, political, economic, and epidemiological research into his first-hand findings in the field. However, I found his historic analysis to be a bit too extensive, as he spends a

large section of the book laying out the heavily detailed history of Haitians dating all the way back to 1492 with Christopher Columbus (Farmer 2006, 153). Farmer acknowledges that this in-depth history may stir up some opposition among his readers, but nevertheless argues for its necessity in order to address present-day phenomena, such as how the people of Do Kay understand AIDS and how social and medical responses registered by both North Americans and Haitians are determined (Farmer 2006, 9).

Although I understood the importance of a historic analysis in this scenario, I found Farmer's to be far too extensive, including pages of detailed accounts that could have been summed up in a few sentences. I did, however, find the section describing the "West Atlantic System" to be a very important part of his ethnography, and I may have not understood its entirety without prior historic knowledge. For example, Farmer describes how this economic network that encompasses Caribbean nations was centered in the U.S. for their own benefit, and he gives shocking and strong evidence to demonstrate how this political-economy related to the epidemic. Farmer states that the five countries with the greatest economic ties to the U.S. were the same five countries with the highest rates of AIDS. Out of those five, Haiti was the most dependent on U.S. exports and in turn had the highest rates of AIDS (Farmer 2006, 260). Had I not been given a previous lesson on the historical relations between the United States and Haiti, I may not have fully comprehended how this system was formed, how it is continued, and how it has had devastating effects on the epidemic in Haiti.

I also found his sample size, which consisted of three key informants in Do Kay that had contracted AIDS during his fieldwork, rather small. Although one might argue that his sample size was in fact larger because he lived with a spoke with a multitude of

locals during his many years, I argue that Farmer based much of his analysis of AIDS in Do Kay on the accounts of Manno, Anita, and Dieudonne. One might also combat this statement with the fact that those were the only three in the village to have contracted HIV at the time, but between the years of first and second publication (1992-2006), Farmer has spent the majority of his life living in Do Kay and treating HIV-infected patients. In addition, I also thought that Farmer could have updated the information he presents with the advent of antiretroviral drugs in 1987, and how it has since affected the community under investigation. However, Farmer has published several other works regarding these more recent developments, and I suppose it may take away from the central theme of the book. The last suggestion that I would provide Farmer with is to mention how his presence affected his subjects and findings. Reflexivity is a concept that the majority of esteemed anthropologists have attempted to present in their writings, and I think Farmer's analysis could benefit from the inclusion of a discussion on his own position in the study.

Lastly, I would like to briefly touch on the intended audience of, *AIDS and Accusation*. As many of us are aware, Paul Farmer is arguably one of the most widely read and well known anthropologists of his time. From winning awards such as the MacArthur Fellowship, to founding and directing one of the most influential health organizations, Partners in Health, to developing intervention models that have been reproduced and implemented by international organizations such as the World Health Organization, Paul Farmer has truly created a legacy for himself that very few can compete with. That being said, I believe that Farmer publishes this sort of literature to first address existing fallacies and misconceptions to the medical and social scientific

community and perhaps also the educated public. From this ethnography, I think that anthropologists may be able to learn how taking a multi-disciplinary approach with their research can produce efficacious results, perhaps more successful than through anthropological fieldwork alone. Secondly, I argue that Farmer also writes to an educated public audience in attempt to humanize the situation that millions of impoverished people face daily, creating a sense of solidarity and awareness, a first step in facilitating sustainable change among those in the greatest need.

Throughout the ethnography, Paul Farmer uses an assertive and slightly aggressive tone to present his well-developed position in regards to the HIV/AIDS epidemic in Haiti. Farmer draws on a multi-disciplinary approach, including ethnographic, historic, epidemiologic, and political-economic analyses in order to fully comprehend how Haiti's oppressed political and economic standing has positioned them to be the victims of historic exploitation, marginalization, and vast poverty. When combined with research regarding North American beliefs and actions in relation to Haiti as bigoted, racist, and ethnocentric, the reader can come to an understanding of how the citizens of Haiti have suffered endlessly and without a voice. Farmer offers the reader valid, largely unheard explanations of the development of three major AIDS-related accusation theories, their effects, and the experiences of those infected.

References

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